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COVID-19 and burns: Lessons learned?

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DOI: <https://doi.org/10.1016/j.burns.2020.05.015>

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ZORA URL: <https://doi.org/10.5167/uzh-189472>

Journal Article

Published Version



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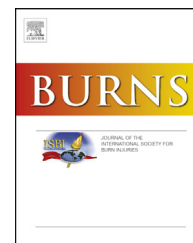
Originally published at:

Kamolz, Lars-Peter; Schiefer, Jennifer L; Horter, Johannes; Plock, Jan A (2020). COVID-19 and burns: Lessons learned? *Burns*, 46(6):1467-1468.

DOI: <https://doi.org/10.1016/j.burns.2020.05.015>

Available online at www.sciencedirect.com

ScienceDirect

journal homepage: www.elsevier.com/locate/burns

Letter to the Editor

COVID-19 and burns: Lessons learned?

With great interest we have read the recent publications on “COVID-19” in the Journal BURNS [1–7]; no topic has concerned us as much in 2020, and will continue to do so in the near future. After the initial lock-down and the gradual start-up back to a “new” normality, it is now crucial to draw conclusions from this crisis.

For this purpose, burn experts from Germany, Austria and Switzerland “met” in a web meeting and discussed the topic “COVID-19 and burns: lessons learned”.

You will find some of these lessons learned in this letter.

Lessons learned:

- Conversion of burns centers and its infrastructure in the event of a pandemic requiring isolation,
- Triage and Optimal Care of burn patients in case of a pandemic,
- Triage and Optimal Care of mass burn casualties in case of a pandemic,
- Securing material delivery, stocking/warehousing during pandemic lockdown,
- International exchange, ensuring cross-border communication.

Profound structural and process changes have been made in preparation for COVID-19 in all 3 countries; special COVID areas have been created and from one day to the next, only emergency operations were possible in order to create capacities (normal ward beds, ICU beds, . . .) for the treatment of COVID-pos. patients. All elective operations have been canceled and all elective outpatient visits too.

At no time in any of the 3 countries was the care of the severely burned patients restricted. Nevertheless, all experts agreed that a mass burn casualty in case of a pandemic, a supply shortage could have occurred relatively easily since a transfer of severely burned patients to neighboring countries due to the COVID restrictions was very likely, to be much more difficult than in non-pandemic times or even not possible. Even within a country, the transfer of COVID patients was not always easy. Therefore, we believe it is important to define corresponding transfer guidelines (within the country and with other countries) for burn patients especially in pandemic times.

However, all experts were of the opinion that the triage of serious burn injuries has to be independently of “COVID time”

and should be performed always only by burn experts and mainly based on the existing burn scores (e.g. ABSI, Baux, . . .); COVID positivity would have been included in the assessment only as an additional risk factor.

Occasional delivery bottlenecks were observed in all German-speaking countries during the COVID crisis: e.g. drugs like antibiotics and medical devices including PPEs. For this reason, the recommendation was also developed during the virtual meeting that supply-related products should probably be in stock for a longer period than before COVID. In addition to the supply bottlenecks, any surgical resource restrictions that may arise were also discussed. Particular attention should be paid to the use of materials and techniques, which increase the reduction in the frequency of operations and dressing changes, increase the flexibility in terms of time and ensure patient safety in the event of burn injuries. This fact has already been discussed in a previous letter [6].

Personnel resources were also discussed during this virtual meeting; alternative duty roster concepts were used in some of the centers and have to be considered in future too. Another point that was brought to our attention again was and is the importance of a regular exchange of information and experiences. Many experts were in regular contact and exchange through web meetings and later also webinars. The benefits of telemedicine and telecommunications were also recognized in the COVID crisis [7]. Many follow-up checks and initial assessments could be carried out in this way and personal contacts reduced. Based on this, we believe that the burn centers worldwide should network even better and learn from and with each other.

Above all, the COVID period clearly showed us how important a functioning health system with sufficient resources is and that despite COVID, adequate care for burn injuries was or should be possible in the German-speaking countries; but it also showed us that we have to learn from this crisis in order to be prepared for the future.

Conflict of interest

According to the requirements of the Journal Burns, the authors declare that there is no conflict of interest.

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Available online xxx

<http://dx.doi.org/10.1016/j.burns.2020.05.015>

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